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Bib Data Sheet

CONFIRMATION NO. 3777

SERIAL NUMBER 09/814,320	FILING DATE 03/21/2001 RULE	CLASS 380	GROUP ART UNIT 2131	ATTORNEY DOCKET NO. 6601-54077 (04134-11)	
APPLICANTS Andy C. Hung, Los Altos, CA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 04/30/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 5
ADDRESS COUDERT BROTHERS LLP 600 Beach Street 3rd Floor San Francisco, CA 94109					
TITLE Code checksums for relocatable code					
FILING FEE RECEIVED 498	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

3



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CONFIRMATION NO. 3777

SERIAL NUMBER 09/814,320	FILING OR 371(c) DATE 03/21/2001 RULE	CLASS 713	GROUP ART UNIT 2135	ATTORNEY DOCKET NO. 6601-54077 (04134-11)	
APPLICANTS Andy C. Hung, Los Altos, CA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY** ** 04/30/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 5
ADDRESS 04586					
TITLE Code checksums for relocatable code					
FILING FEE RECEIVED 498	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		